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## **FEC FORM 2**

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	Mr. Steve Stivers							Santice N	unale - :	
	(b) Address (number and street) 372 W 2nd Avenue	☐ Check if address changed			Candidate's FEC Identification Number     H8OH15076					
	(c) City, State, and ZIP Code						3. Is This New		V	Amended
	Columbus	OH 43201-3312				Statement (N)	OR	×	(A)	
4.	Party Affiliation REPUBLICAN PARTY	5. Office Soug House	ht			6. State & Distr	rict of Candidate 15			
	REPUBLICAN PARTI	110036				OH	10			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s). (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full)									
	Stivers For Congres	S								
	(b) Address (number and street) 4679 Winterset Drive									
	(c) City, State, and ZIP Code									
	Columbus					ОН	43220-8113			
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.										
	NOTE: This designation should be f	lea with the pri	ncipai cam	oaign co	mmitte	·e.				
(a) Name of Committee (in full)  Security For America Fund IV										
	(b) Address (number and street) 4703 Woodway Lane NW									
	(c) City, State, and ZIP Code									
	Washington					DC	20016-3240			
	I certify that I have exa	mined this Stat	ement and	to the be	est of r	ny knowledge a	nd belief it is true, correct a	nd comple	te.	
Signature of Candidate Date										
M	r. Steve Stivers				[Elect	ronically Filed]	09/28/2011			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										
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FEC FORM 2 (REV. 02/2009)

## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

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DESIGNA	TION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, w candidacy.	which is NOT my principal campaign committee, to receive and expend funds o	n behalf of my
NOTE:This designation should be filed with	n the principal campaign committee.	
(a) Name of Committee (in full)		
The Ohio Five		
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314-5404	
DESIGNA	ATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, v candidacy.	which is NOT my principal campaign committee, to receive and expend funds o	n behalf of my
NOTE: This designation should be filed with	h the principal campaign committee.	
(a) Name of Committee (in full)		
Freshman Majority Fund		
(b) Address (number and street) 2470 Daniels Bridge Road Suite 121		
(c) City, State and ZIP Code		
Athens	GA 30606-6188	
DESIGNA	TION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, v candidacy.	which is NOT my principal campaign committee, to receive and expend funds o	n behalf of my
NOTE: This designation should be filed with	h the principal campaign committee.	
(a) Name of Committee (in full)		
Team 2012		
(b) Address (number and street) 228 S Washington Street		
Suite 115		
(c) City, State and ZIP Code  Alexandria	VA 22314-5404	